



Commonwealth
of Massachusetts

Center for Health
Information and Analysis

All Payer Claims Database Data Volume Reports

2008 - 2012

March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: CHIA-APCD@state.ma.us.

Thank you for your interest in the All Payer Claims Database.

Commonwealth of Massachusetts-Center for Health Information and Analysis (CHIA)
APCD Data Volume Reports 2008-2012 (based on data received by 12/19/2012)

WellPoint, Inc.														
File Type*	Submission Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
PR	2011	0	0	12,061	0	137,574	11,539	0	0	11,370	0	0	10,662	183,206
PR	2012	0	0	11,017	0	0	10,508	0	0	10,201				31,726
ME	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
ME	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
ME	2011	0	0	0	0	0	0	0	0	0	0	0	5,132,023	5,132,023
ME	2012	0	0	0	0	0	1,305,432	1,321,566	1,303,549	1,687,294				5,617,841
PV	2011	909,939	906,005	1,855,471	1,012,367	46,421,894	921,742	896,365	958,666	969,451	890,477	899,828	927,190	57,569,395
PV	2012	879,155	953,393	835,727	961,596	906,464	919,125	878,385	913,099	879,738	963,770			9,090,452
MC	2008	1,535,319	1,543,071	1,551,208	1,592,214	1,585,743	1,468,450	1,512,713	1,531,830	1,512,214	1,604,227	1,474,063	1,562,497	18,473,549
MC	2009	1,428,149	1,284,445	1,470,596	1,560,957	1,414,726	1,440,967	1,389,721	1,382,769	1,384,281	1,491,512	1,334,216	1,460,141	17,042,480
MC	2010	1,065,812	1,014,650	1,207,263	1,168,512	1,183,107	1,058,210	1,085,972	1,064,147	1,054,255	1,083,732	1,021,944	1,078,126	13,085,730
MC	2011	1,015,083	1,057,405	1,306,906	1,282,999	1,257,327	1,278,079	1,161,011	1,145,504	1,112,692	1,120,462	1,203,637	1,248,675	14,189,780
MC	2012	1,010,821	1,105,637	677,891	593,811	1,371,385	1,332,709	1,136,742	1,353,287	1,183,100				9,765,383
PC	2008	3,578,572	3,926,998	3,688,044	3,919,537	4,548,403	3,819,784	3,858,374	3,912,589	3,941,623	4,060,762	2,623,355	3,760,561	45,638,602
PC	2009	3,603,346	3,886,118	3,552,516	3,914,654	3,886,040	3,792,160	3,698,346	3,618,963	3,791,199	3,775,515	2,650,424	3,525,126	43,694,407
PC	2010	1,094,551	757,448	1,051,904	959,581	870,064	913,350	862,088	853,688	904,598	851,675	838,547	869,944	10,827,438
PC	2011	781,702	720,185	854,921	1,084,545	1,728,942	1,265,910	1,022,232	941,393	1,635,433	1,160,661	843,912	1,041,898	13,081,734
PC	2012	1,379,764	1,368,524	964,662	641,048	703,334	1,833,870	573,716	2,306,101	680,337				10,451,356
DC	2008	1,677	1,719	1,612	2,001	1,788	1,461	1,690	1,477	1,235	1,583	1,347	1,513	19,103
DC	2009	1,091	1,552	1,486	2,024	1,352	1,493	1,723	1,255	1,601	1,326	1,257	1,619	17,779
DC	2010	1,461	1,361	1,883	1,371	1,420	1,582	1,224	1,465	1,575	1,263	1,236	1,490	17,331
DC	2011	1,337	107	1,763	1,460	1,391	1,563	1,238	1,499	1,027	1,068	1,167	1,086	14,706
DC	2012	1,171	1,415	1,137	1,003	1,344	969	982	1,208	892	1,126			11,247

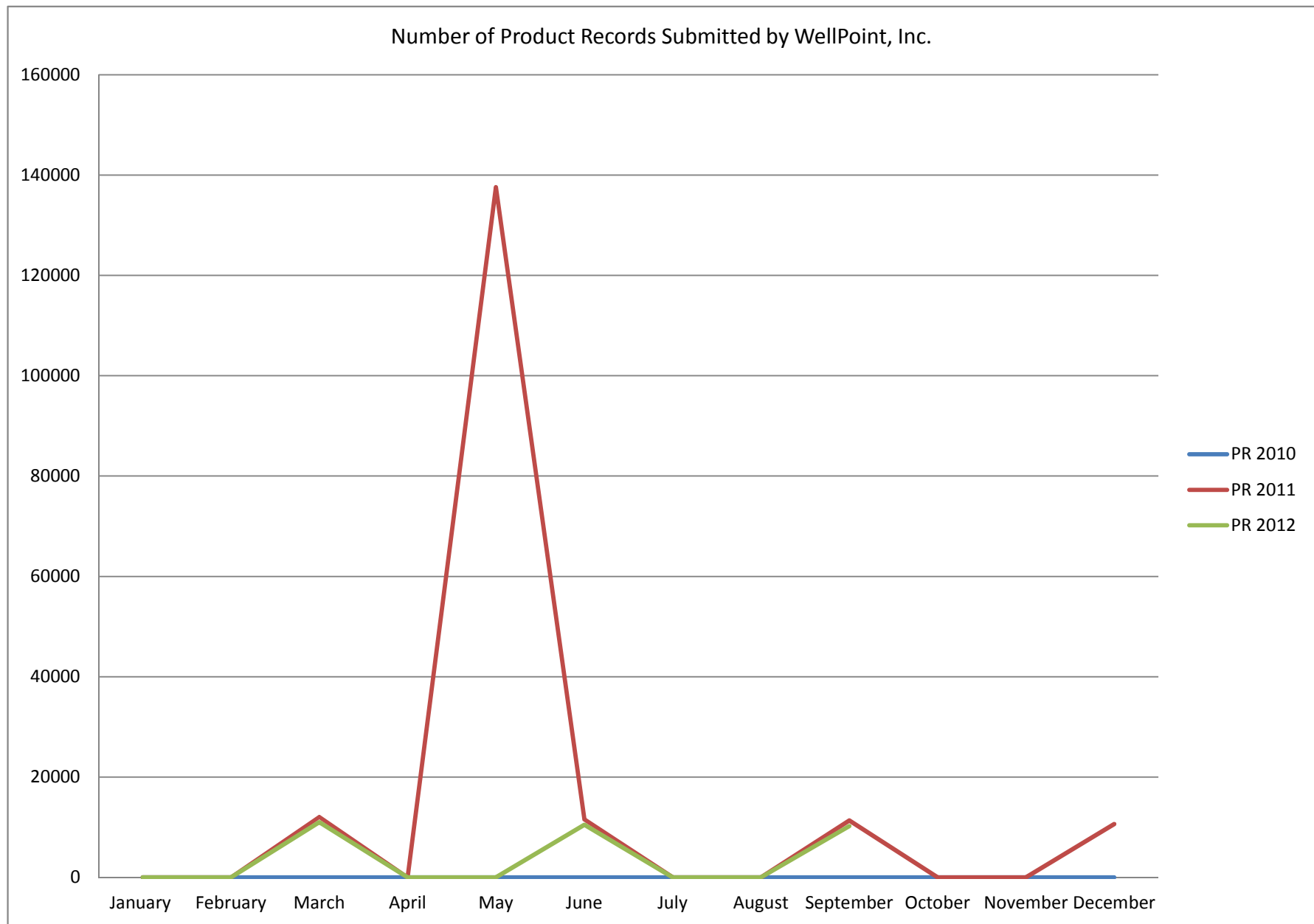
*Key: PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:

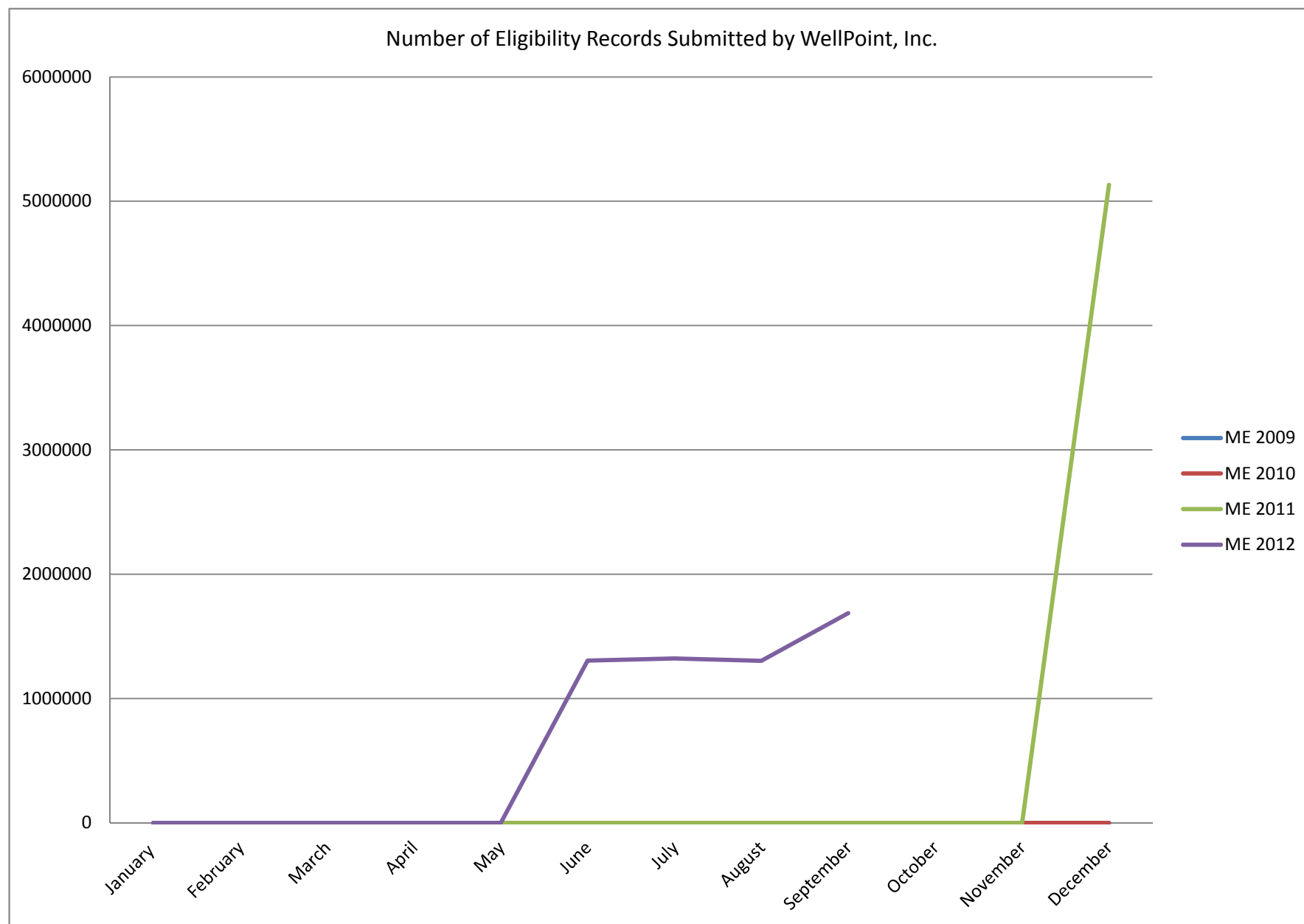
- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.

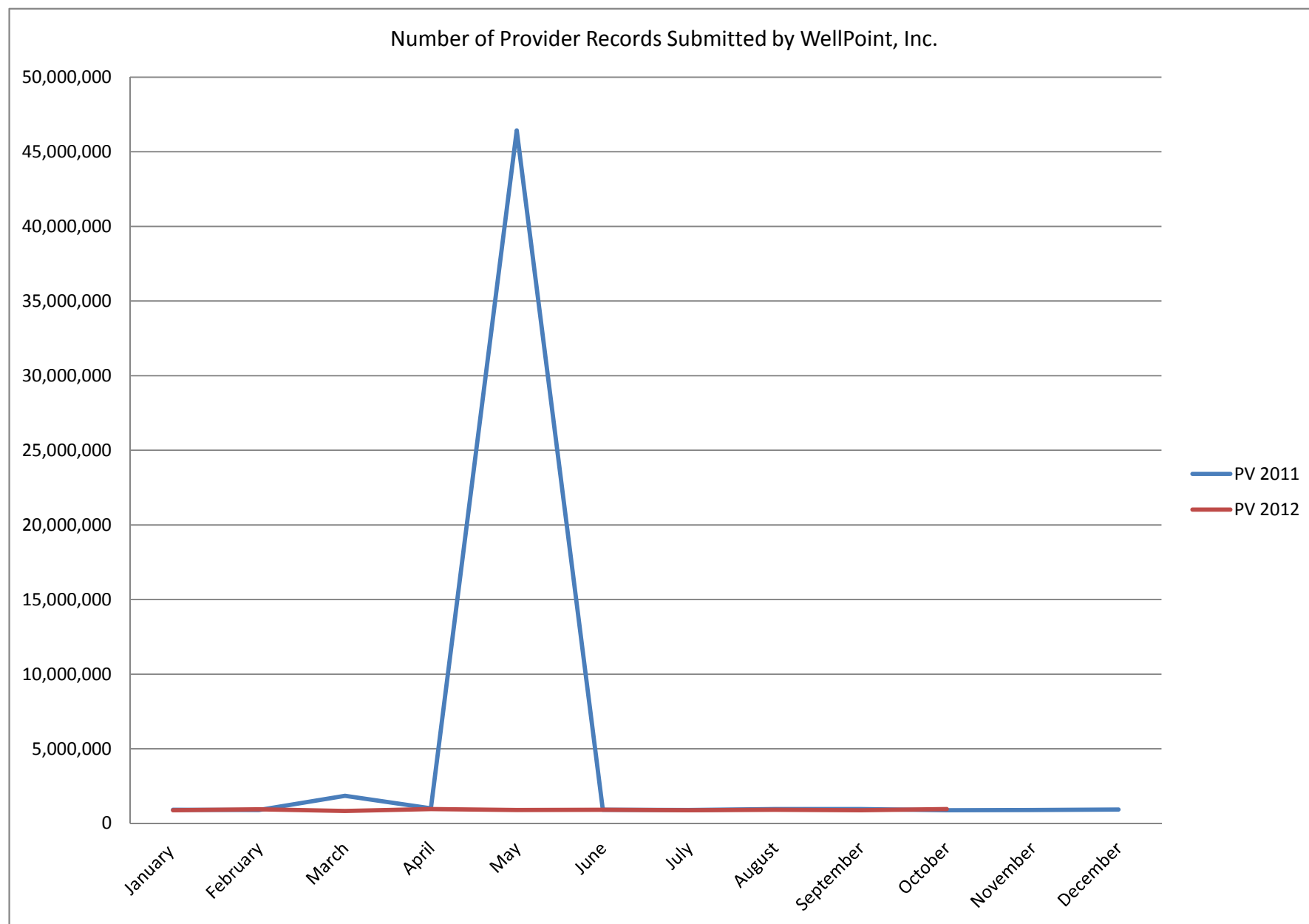
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